<b>RI-1</b> (	)4	40 RHODE IS	SLAND T INDIVIDITAL	INCOME TAX	RETURN	2003	3		
NAME		First Name	INDIVIDUAL	Initial		ast Name	Your Soc	cial Secu	urity Number
AND ADDRESS		Spouse's First Name		Initial	La	ast Name	Spouse's	Social	Security Number
please print or type		Present Home Address	(Number and street, in	cluding apartment numb	er or rural route)		Daytime	Telepho	one Number
		City, Town or Post Offic	е	State	Zi	p code	City or T	own of L	_egal Residence
Electoral Contribution		\$5.00 (\$10.00 if a joir instructions. (This will tax or reduce your ref	not increase your	party, check th	e 1st \$2.00 (\$4.00 if a join ne 1st box and fill in the n raid to a nonpartisan gene	name of the political party	/. If you	Nonp	artisan general accou
FILING STATUS		Check only one box	1 2	Married filing jointly	3 Married filing se	4 🔲	Househol	5 d	Qualifying widow(e
NCOME,	1.	Federal AGI (Adjuste	ed Gross Income) - I	Federal Form 1040, lii	ne 34; 1040A, line 21;	1040EZ, line 4 or Tel	efile, line I.	. 1.	
TAX AND CREDITS	2.	Net modifications to	Federal AGI (if no n	nodifications, enter ze	ro on this line) - Page	2, Schedule I, Line 2	5	2.	
Single	3.	Modified Federal AG	GI - combine lines 1	and 2 (add net increas	ses or subtract net dec	creases)		. 3.	
\$4,750 Married filing	4.		,	• ,	om Federal Schedule A separate) see itemized	· ·	•	4.	
jointly or Qualifying								. 5.	
widow(er)  \$7,950  Married filing		If line 3 is over \$104,6	25, see worksneet on	page I-4 for exemption	\$3,050 and enter resu		\$3,050 =	$\vdash$	
separately \$3,975	7.	RI TAXABLE INCOI	WE - subtract line 65	3 from line 5				. 7.	
Head of household \$7,000	8.	A. RI income tax  Check only one box	RI Tax Table or Rate Schedules	RI Schedule CGW	RI Schedule D	RI Schedule J F	RI-8615	8A.	
However, people over		B. Other RI taxes f	rom page 3, RI Sche	edule OT, line 15				. 8B.	
65, blind or can be	9.	RI alternative minim	um tax from page 6,	Form RI-6251, line 14	4			9.	
claimed as a dependent,	10.	. Total RI income tax	- add lines 8A, 8B ar	nd 9				. 10.	
see the RI Deduction Schedules on	11.				chedule II, line 34 attach for	<del></del>		-	
page 7, check  ✓ this box and attach					2, schedule III, line 41.			$\frac{1}{2}$	
the schedule.	12.							. 12.	
	13.	. RI income tax after of	credits - subtract line	e 12 from line 10 (not	less than zero)			. 13.	
Attach	14.	. RI use/sales tax fron	n page 3, Schedule	T-205P, line 24 (see ii	nstructions)			. 14.	
Forms W-2 and 1099	14. RI use/sales tax from page 3, Schedule T-205P, line 24 (see instructions)					. 15.			
here.	16.	. RI checkoff contribut						16.	
	17.	•	•	· ·	es 15 and 16			17.	
PAYMENTS	18.	. A. RI 2003 income	tax withheld (please	e attach forms W-2, 10	099, etc.)	18A.		$\Box$	
AND PROPERTY		B. 2003 estimated	tax payments and a	mount applied from 20	002 return	18B.		1	Check ✓ if extension is
TAX		C. Property tax reli	ef credit from RI-104	10H, line 15 or 22 (atta	ach form RI-1040H)	18C.		1	attached.
RELIEF CREDIT		D. RI earned incom	ne credit from page 3	3, RI Schedule EIC, lii	ne 9	18D.		1	Ш
		E. Other payments				18E.		1	
		F. TOTAL PAYMEI	NTS AND CREDITS	- add lines 18A, 18B	, 18C, 18D and 18E			. 18F.	
AMOUNT DUE	19.	. If line 17 is LARGEF	R than line 18F, Sub		YOU OWE THIS AM		040V.	19.	
REFUND	20.				S IS THE AMOUNT Y	OU OVERPAID		20.	
	21.	. Amount of overpaym	nent to be refunded.					21.	
	22	A	ant to be emplied to	2004 antimated to		22		$\Box$	

# RI-1040 2003

RI SCHEDULE I	RI MODIFICATIONS TO FEDERAL AGI
VI OOIIEDUEE I	IN MODII IOANONO TO I EDEIXAL ACI

23. A. Modifications <b>INCREASING</b> Federal AGI - income from obligations of an subdivisions, other than RI (attach documentation)	' 12.	3A.		
B. Other modifications INCREASING Federal AGI (see instructions - attach	documentation)23	3B.		
C. Total modifications INCREASING Federal AGI - add lines 23A and 23B			23C.	
24. A. Modifications <b>DECREASING</b> Federal AGI - income from obligations of the in Federal AGI but exempt from state income taxes (attach documentation)	e US government included 24	4A.	<u> </u>	
B. Other modifications <b>DECREASING</b> Federal AGI (see instructions - attack	n documentation)24	4B.		
C. Total modifications <b>DECREASING</b> Federal AGI - add lines 24A and 24B	(Enter as a negative amoun	t)	24C.	( )
25. <b>NET MODIFICATIONS TO FEDERAL AGI</b> - combine lines 23C and 24C (en	ter here and on page 1, line 2	)	25.	
RI SCHEDULE II ALLOWABLE FEDER	AL CREDITS			
26. RI income tax from page 1, line 10			26.	
27. Foreign tax credit from Federal Form 1040, line 44			$\vdash$	
28. Credit for child and dependent care expenses from Federal Form 1040, line	<b>⊢</b>		1	
29. Credit for the elderly or the disabled from Federal Form 1040, line 46 or 104	<u> </u>	9.	1	
30. Federal mortgage interest credit from Federal Form 8396, line 11	_	-	1	
	<u> </u>		-	
31. Other federal credits (see instructions for credits) from Federal Form 1040, li	L			
32. Total - add lines 27, 28, 29, 30 and 31			. 32.	
33. Tentative allowable federal credits - multiply line 32 by 25% (.25)			33.	
34. MAXIMUM CREDIT - (line 26 or 33 whichever is SMALLER) - Enter here an	id on page 1, line 11A		34.	
RI SCHEDULE III CREDIT FOR INCOME	TAXES PAID TO A	NOTHER STAT	E NOT of th	FE: Attach signed copy ne other state return.
35. RI income tax (page 1, line 10) less allowable federal credits (page 2, line 34	1)		35.	
36. Adjusted gross income from other state. If more than one state - see instruct	ions		36.	
37. Modified federal AGI - page 1, line 3			. 37.	
38. Divide line 36 by line 37			38.	
39. Tentative credit - multiply line 35 by line 38			39.	
40. Tax due and paid to other state (see specific instructions) Insert name of s	tate paid		40.	
41. MAXIMUM TAX CREDIT (line 35, 39 or 40 whichever is the smallest) Enter			41.	
RI SCHEDULE IV RI CHECKOFF Y CON	ITDIDITIONS NO	OTE: Contributions reduc	ce you	r refund or increase
3	\$1.00 \$5.00 \$10.00 (	our balance due. Other	1 1	
42. A. Drug program account		\$	42A.	
B. Olympic Contribution Yes No \$1.00 Contribution (\$2.00 if a joint retu			42B.	
C. RI Organ Transplant Fund		\$	42C.	
D. RI Council on the Arts		<b>\$</b>	42D.	
E. RI Nongame Wildlife Fund		<b>\$</b>	42E.	
F. Childhood Disease Victims' Fund		<b>S</b>	42F.	ı
G. TOTAL CONTRIBUTIONS - add lines 42A, 42B, 42C, 42D, 42E and 42F	- Enter here and on page 1,	line 16	42G.	
Under penalties of perjury, I declare that I have examined this return, and		and belief, it is true, cor	rect ar	nd complete.
Your Signature	Spouse's Signature			
	7			Date Na 🗆
If you do not need forms mailed to you next year, check box. ✓ ☐  Paid preparer's signature and address	May the division contact your			Yes No none number
		,	(	)

**RI-1040** 

Name(s) shown on Form RI-1040 Your Social Security Number

RI	SCHEDULE EIC RHODE ISLAND EARNED INCOME CREDIT		
1.	Rhode Island income tax from RI-1040, page 1, line 13	1.	
2.	Federal earned income credit from Federal Form 1040, line 63; 1040A, line 41; 1040EZ, line 8 or Federal Telefile, line L		
3.	Rhode Island percentage		25%
4.	Multiply line 2 by line 3	4.	2070
5.	Enter the SMALLER of line 1 or line 4		
6.	Subtract line 5 from line 4 (if zero or less, enter the amount from line 5 on line 9. Otherwise, continue to line 7)	6.	
7.	Refundable percentage	7.	5%
8.	RI refundable earned income credit - multiply line 6 by line 7	8.	
9.	TOTAL RI EARNED INCOME CREDIT - add line 5 and line 8. Enter here and on RI-1040, line 18D	9.	
XAT	SCHEDULE OT OTHER RHODE ISLAND TAXES ON LUMP-SUM DISTRIBUTIONS, PARENTS' ELECTION TO REPORT CHILD'S INTEREST AND		,
	CAPTURE OF FEDERAL TAX CREDITS AND OTHER MISCELLANEOUS FEDERAL INCOME TAXI	_	
10.	Tax on lump-sum distributions - Federal Form 4972, line 30	10	
11.	Parents' election to report child's interest and dividends from all Federal Form(s) 8814, line 9	11	
12.	Amount of recapture of federal tax credits and other miscellaneous federal income taxes (see instructions)		
13.			
14.	Rhode Island percentage	14	25%
15.	OTHER RHODE ISLAND TAXES - Multiply line 13 by line 14. Enter here and on RI-1040, line 8B	15.	
16. 17.	-8615 TAX FOR CHILDREN UNDER AGE 14 WHO HAVE INVESTMENT INC Child's tax from Federal form 8615, line 18 Rhode Island percentage TAX - multiply line 16 by line 17 - Enter here and on RI-1040, line 8A and check the RI-8615 box	16	25%
_	205P INDIVIDUAL CONSUMER'S USE/SALES TAX RETURN  Schedule of purchases subject to the use/sales tax (if you need more space to list your purchases, attach a separate sheet).  A.  B.  C.	19A. 19B. 19C.	
	D.	19D.	
20.	Total sales price of purchases subject to the use/sales tax - add lines 19A, 19B, 19C and 19D		
21.			7%
22.	Amount of tax - multiply line 20 by line 21		1 /0
23.			
24.	TOTAL AMOUNT DUE - subtract line 23 from line 22 - enter here and on RI-1040, page 1, line 14	24.	

## RI Schedule CGW rhode island capital gains worksheet

2003

Name(s) shown on Form RI-1040 or RI-1040NR	Your Social Security Number

#### NOTE:

- Use this form **ONLY** if you did not calculate your tax on Federal Schedule D **AND**;
  - 1. you checked the box on Federal Form 1040, line 13a, OR
  - 2. you entered an amount on Federal Form 1040A, line 10a.

	You must attach	this schedule to	RI-1040 or RI-1040NR	and check the box labeled	RI Schedule CGW on line 8A
--	-----------------	------------------	----------------------	---------------------------	----------------------------

	RI taxable income, RI-1040 or RI-1040NR, line 7 1.	_		
2.	Enter the amount of capital gains from Federal Form 1040, line 13a or 1040A, line 10a			
3.	Subtract line 2 from line 1 (if zero or less, enter zero)			
	Figure the tax on the amount on line 3. Use the 2003 RI Tax Table or Tax Rate Schedule, whichever applies	4.		
5.	Enter the SMALLER of the amount on line 1 above OR  • \$47,450 If Married filing jointly or Qualifying widow(er)  • \$28,400 If Single  • \$38,050 If Head of household  • \$23,725 If Married filing separately			
6.	Is the amount on line 3 equal to or more than the amount on line 5?			
	Yes. Leave lines 6 through 8 blank; go to line 9 and check the "NO" box.			
	No. Enter the amount from line 3			
7.	Subtract line 6 from line 5			
8.	Multiply line 7 by 2.5% (.025)	8.		
9.	Are the amounts on lines 2 and 7 the same?			
	Yes. Leave lines 9 through 12 blank and go to line 13.			
	No. Enter the <b>SMALLER</b> of line 1 or line 2			
10.	Enter the amount, if any, from line 7			
11. Subtract line 10 from line 9. (if zero or less, enter zero)				
	Multiply line 11 by 5% (.05)	12.		
13.	Add lines 4, 8 and 12	13.		
14.	Figure the tax on the amount on line 1. Use the 2003 RI Tax Table or Tax Rate Schedule, whichever applies	14.		
15.	Tax on all taxable income (including capital gains). Enter the <b>SMALLER</b> of line 13 or line 14. Also enter this amount on RI-1040 or RI-1040NR, page 1, line 8A and check the RI Schedule CGW box	15.		

2003

Nam	e(s) shown on Form RI-1040 or RI-1040NR	Your Social Security Number	
1	RI taxable income, RI-1040 or RI-1040NR, line 7 (IF THIS LINE IS ZERO OR LESS, DO NOT COMPLET	TE THIS FORM\	
2.	Enter the <b>SMALLER</b> of Federal Schedule D, lines 17a or 16		
3.	Enter the amount from Federal Form 4952, line 4g		
3. 4.	Subtract line 3 from line 2		
	Combine Federal Schedule D, line 7b and Federal 28% Rate Gain		
٥.	Worksheet on page D-8, lines 1 through 5. (if zero or less, enter zero) 5.		
6.	Enter the <b>SMALLER</b> of line 5 above or Federal Schedule D, line 20. (not less than zero)		
7.	Enter the amount from Federal Schedule D, line 19 7.		
8.	Add lines 6 and 7 8.		
	Subtract line 8 from line 4. (if zero or less, enter zero)		
10.	Subtract line 9 from line 1. (if zero or less, enter zero)	10.	
11.	Enter the SMALLER of the amount on line 1 above OR  • \$47,450 If Married filing jointly or Qualifying widow(er)  • \$28,400 If Single  • \$38,050 If Head of household  • \$23,725 If Married filing separately		
12.	Enter the <b>SMALLER</b> of line 10 or 11		
13.	Subtract line 4 from line 1. (If zero or less, enter zero)		
14.	Enter the <b>LARGER</b> of line 12 or line 13		
15.	Figure the tax on the amount on line 14. Use the 2003 RI Tax Table or Tax Rate Schedule, whichever approximately a	olies 15.	
	IF LINES 11 AND 12 ARE THE SAME, SKIP LINES 16 THROUGH 21 AND GO TO LINE 22.	OTHERWISE, GO TO LINE 16.	
16.	Subtract line 12 from line 11		
17.	Qualified 5 year gain, if any, from Federal Schedule D, line 35 17.		
	Enter the <b>SMALLER</b> of line 16 or line 17		
19.	Multiply line 18 by 2.00% (.02)		
20.	Subtract line 18 from line 16		
21.	Multiply line 20 by 2.5% (.025)	21.	
	IF LINES 1 AND 11 ARE THE SAME, SKIP LINES 22 THROUGH 34 AND GO TO LINE 35.	OTHERWISE, GO TO LINE 22.	
22.	Enter the <b>SMALLER</b> of line 1 or line 9		
	Enter the amount from line 16 above. (if line 16 is blank, enter zero) 23.		
	Subtract line 23 from line 22		
	Multiply line 24 by 5.00% (.05)	25.	
	IF LINE 7 IS ZERO OR BLANK, SKIP LINES 26 THROUGH 31 AND GO TO LINE 32. OTHE		
26	Enter the smaller of line 4 or line 7		
	Add lines 4 and 14		
	Enter the amount from line 1 above		
	Subtract line 28 from line 27. (if zero or less, enter zero)		
	Subtract line 29 from line 26. (if zero or less, enter zero)		
31.	Multiply line 30 by 6.25% (.0625)		
	IF LINE 6 IS ZERO, SKIP LINES 32 THROUGH 34 AND GO TO LINE 35. OTHERWISE, GO		
	Add lines 14, 16, 24 and 30		
	Subtract line 32 from line 1		
	Multiply line 33 by 7.00% (.07)		
	Add lines 15, 19, 21, 25, 31 and 34		
36.	Figure the tax on the amount on line 1. Use the 2003 RI Tax Table or Tax Rate Schedule, whichever applied	es 36.	
37.	Tax on all taxable income (including capital gains). Enter the SMALLER of line 35 or line 36. Also ente RI-1040 or RI-1040NR, page 1, line 8A and check the RI Schedule D box		

2003

Nam	e(s) shown on Form R	I-1040 or RI-1040NR			Your Soci	al Security Number
	DT 4 ALTEE	DALATIVE BAINIBALIBA TAV				
		RNATIVE MINIMUM TAX Iinimum Taxable Income - Federal Form 6251, li	20			4
	Exemption	If your filing status is Single or Head of household Married filing jointly or Qualifying widow(er)	and line 1 is not ov \$112,500 150,000	ver then en	ter on line 2 \$35.750	2.
	,	Married filing separately amount shown above for your filing status, see	. •	•	24,500	
3.		ine 1				
4.	tax using the tax table	x on RI Schedule D or CGW, complete part 2 ar e or tax rate schedule and line 3 is less than \$1 . Otherwise, multiply line 3 by 7% (.07) and sub	75,000 (\$87,500 if Mar	ried filing separ	ately) then multiply	
5.	Alternative minimum	tax foreign tax credit - Federal Form 6251, line	32	5.		_
6.	RI Rate			6.	25%	
7.	Multiply line 5 by line	6				<del>_</del> 7.
8.	Tentative minimum ta	x - subtract line 7 from line 4				8.
9.	RI tax from RI-1040 o	or RI-1040NR, page 1, line 8A		9.		
10.		I-1040 or RI-1040NR, line 27				_
11.	•			<u>/</u>		
12.		e 11				
		reign tax credit - subtract line 12 from line 9				
		Im tax - subtract line 13 from line 8 (if zero or le				
17.						
PΑ	RT 2 ALTER	RNATIVE MINIMUM TAX USING	MAXIMUM CA	APITAL G	AINS RATES	
15.		m line 3 above				
16.	Amount from RI Sche	edule D, line 9 or RI Schedule CGW, line 2 (refig	aured for AMT, if neces	sarv) 16.		
		edule D, line 7 or RI Schedule CGW enter zero				_
18.		d 17	,	• • • • • • • • • • • • • • • • • • • •		_
		Schedule D, line 4 or RI Schedule CGW, line 2				_
		<b>LER</b> of line 18A or 18B	. •			_
19		of line 15 or line 18C				<b>–</b> 19
		line 15				
	If line 20 is less than	\$175,000 (\$87,500 if Married filing separately) to subtract \$875 (\$438 if Married filing separate	then multiply line 20 by	6.5% (.065). C	Otherwise, multiply	-
22.		m RI Schedule D, line 16 or RI Schedule CGW,				
		of line 15 or line 16				_
24.	Enter the SMALLER	of line 22 or line 23 (if zero, go to line 30)		24.		_
	Qualified 5 year gain,	if any, from RI Schedule D, line 17 if necessary)				_
26.	Enter the SMALLER	of line 24 or line 25		26.		
27.		00% (.02)				 27.
28.		line 24				<del></del>
29.		50% (.025)				 29.
		line 23				
		00% (.05)				<del>_</del> 31.
		O OR BLANK, SKIP LINES 32 AND 33 A				
32		line 19				
33.		25% (.0625)				_ 33
		31 and 33				
		\$175,000 (\$87,500 if Married filing separately) t				04.
	line 15 by 7% (.07) a	nd subtract \$875 (\$438 if Married filing separate	ely) from the result			-
30.	Enter the SMALLER	of lines 34 or 35 here and on line 4 above				30.

RI Deduction Schedules for RI-1040 or RI-1040NR, line 4 Name(s) shown on Form RI-1040 or RI-1040NR Your Social Security Number A. STANDARD DEDUCTION SCHEDULE FOR PEOPLE AGE 65 OR OLDER OR BLIND DO NOT use this schedule if someone can claim you, or your spouse if filing jointly, as a dependent. Instead use RI Deduction Schedule B below. YOU were 65 or older, (born before 01/02/1939), Blind, SPOUSE was 65 or older, (born before 01/02/1939), Blind AND the number on line A is .... If your filing status is ..... THEN your RI standard deduction is .... Single \$5,900 7,050 Married filing jointly 8,900 9,850 Qualifying widow(er) 10.800 11,750 Married filing separately 4,925 5,875 6.825 7,775 Head of household 8,150 B. STANDARD DEDUCTION SCHEDULE FOR DEPENDENTS Use this schedule ONLY if someone can claim you, or your spouse if filing jointly, as a dependent. 750 4. Enter the amount shown below for your filing status. \$4.750 Single..... Married filing jointly or Qualifying widow(er)..... 7,950 Married filing separately..... 3,975 Head of household..... 5. STANDARD DEDUCTION A. Enter the SMALLER of line 3 or line 4. If under age 65 and not blind, STOP HERE and enter this amount on RI-1040 B. Check if: YOU were 65 or older, (born before 01/02/1939), Blind, SPOUSE was 65 or older, (born before 01/02/1939), Blind If age 65 or older or blind, multiply the number of boxes checked by: \$1,150 if Single or Head of household; \$950 if Married filing jointly, Married filing separately or Qualifying widow(er)......5B. C. Add lines 5A and 5B. Enter the total here and on RI-1040 or RI-1040NR, line 4..... \*EARNED INCOME includes wages, salaries, tips professional fees and other compensation received for personal services you performed. It also includes any amount received as a scholarship that you must include in your income. Generally, your earned income is the total of the amount(s) you reported on Federal Form 1040, lines 7, 12 and 18 minus the amount, if any, on Federal Form 1040, line 29. C. ITEMIZED DEDUCTION SCHEDULE (If you claimed a modification on RI-1040 or RI-1040NR, line 2; you must recalculate your Federal Schedule A before you complete this schedule) 2. Add the amounts from Federal Form, Schedule A, lines 4, 13 and 19 plus any gambling and casualty or theft losses included on line 27 3. Is the amount on line 2 less than the amount on line 1? No. STOP HERE! Your deduction is not limited. Enter the amount from line 1 above on RI-1040 or RI-1040NR, line 4. 7. Is the amount on line 6 less than the amount on line 5? No. STOP HERE! Your deduction is not limited. Enter the amount from line 1 above on RI-1040 or RI-1040NR, line 4. 

### RI-2210A RI UNDERPAYMENT OF ESTIMATED TAX BY INDIVIDUALS

2003

Name(s) shown on Form RI-1040 of	Your Social Security Number	
PART 1 REQUIRED	ANNUAL PAYMENT	
1. Enter your <b>2003</b> RI income to	ax from RI-1040, line 13 less line 18D or RI-1040NR, line 15 less line 18D	1.
	wn on line 1	
3. RI withheld taxes paid for 200		
	f the result is \$250.00 or less do not complete the rest of this form)	
5. Enter your <b>2002</b> RI tax from	RI-1040, line 13 or RI-1040NR, line 15	
6. Enter the <b>SMALLER</b> of line 2	or line 5	6.
PART 2 SHORTCUT	METHOD	
You can use this method if you mee	et the following conditions (Otherwise, you must complete RI-2210 to figure y	our underestimating interest):
① You made no estimated page	ayments OR all 4 estimated payments were equal and paid by the appropriate	due dates;
	e RI-2210, part 5 (Annualized Income Installment Worksheet).	
7. Enter the amount from Part 1	, line 6 above	7.
8. Enter the total withholding and	d estimated tax you paid from RI-1040, lines 18A and 18B or RI-1040NR, lines	18A, 18B and 18C. 8.
9. Underpayment - subtract line	8 from line 7	9.
10. Multiply line 9 by 7.9808% (.0	79808)	10.
11. If the amount on line 9 was pa	aid on or after 4/15/04, then enter \$0	
If the amount on line 9 was pa	aid before 4/15/04, then make the following calculation:	
The amount on line 9 (ti	mes) the number of days paid before 4/15/04 (times) .00022 and enter the resu	It here 11.
12. UNDERESTIMATING INTER	EST - subtract line 11 from line 10 - enter here and in the space provided on RI	
RI-1040NR. line 19		12.

#### **INSTRUCTIONS**

#### **PURPOSE OF THIS FORM**

Individuals (except qualified farmers and fishermen) should use this form to determine if their income tax was sufficiently prepared throughout the year by having RI tax withheld or by paying RI estimated tax; if not, a charge may be imposed on the underpayment of the taxes. Complete Part 1 of this form to determine if the payment of the charge may be avoided.

#### WHO CAN FILE THIS FORM

You can use this form only if you meet the following conditions ① You made no estimated payments **OR** all 4 estimated payments were equal and paid by the appropriate due dates **AND** ② You are not completing the Annualization Income Worksheet on RI-2210. If you do not meet these conditions, you must file RI-2210. RI-2210 is available online www.tax.ri.gov or by calling our forms department at (401) 222-1111.

#### **FARMERS AND FISHERMEN**

If you meet **BOTH** of the following tests, you may be exempt from the charge for underpayment of estimated tax: ① Gross income from farming or fishing is at least 2/3 (two thirds) of your annual gross income **AND** ② you filed form RI-1040 or RI-1040NR and paid the tax due on or before March 1, 2004. If you meet both of these tests, write next to line 1 "**EXEMPT, FARMER/FISHERMAN**" and do not complete the rest of this form. Attach this form to your return or mail to: The RI Division of Taxation - One Capitol Hill - Providence, RI 02908-5806 if the return has been previously filed.

#### PART 1 REQUIRED ANNUAL PAYMENT

- Line 1 Enter your 2003 Rhode Island tax from RI-1040, line 13 less line 18D or RI-1040NR, line 15 less line 18D.
- Line 2 Multiply line 1 by 80% (.80).
- Line 3 Enter the amount of 2003 Rhode Island income taxes withheld from RI-1040, line 18A or RI-1040NR, lines 18A and 18C.
- Line 4 Subtract line 3 from line 1. If the result is \$250.00 or less, you do not owe any underestimating interest and need not complete the rest of this form.
- Line 5 Enter your **2002** Rhode Island income tax from RI-1040, line 13 or RI-1040NR, line 15. If you had no federal tax liability for **2002** and you were a Rhode Island resident during all of **2002**, and your **2002** federal tax was (or would have been had you been required to file) for a full 12 months, then enter zero (0).
- Line 6 Enter the **SMALLER** of line 2 or line 5 (including zero). If line 6 is zero, you do not owe any underestimating interest and need not complete the rest of this form. However, you must attach this form to your Rhode Island rerun.

#### PART 2 SHORTCUT METHOD

- Line 7 Enter the amount from part 1, line 6.
- Line 8 Enter the amount of estimated and withholding tax you paid for 2003 from RI-1040, lines 18A and 18B or RI-1040NR, lines 18A, 18B and 18C
- Line 9 Subtract line 8 from line 7.
- Line 10 Multiply line 9 by 7.9808% (.079808).
- Line 11 If you paid the tax balance due before 4/15/2004, multiply the number of days paid before 4/15/2004 by the amount on line 9 by .00022 and enter the amount on line 11.
- Line 12 Subtract line 11 from line 10. Enter here and in the space provided on RI-1040 or RI-1040NR, line 19.